

ANNUAL SUBJECT INDEX OF ARTICLES

JANUARY THROUGH DECEMBER 1985

Each listing shows the title of a major article or short article, the latter in italics. The first two figures following the title indicate the date of the issue, and the last figure indicates the number of the page upon which the article begins. MEDICAL ECONOMICS will send physicians any three articles listed on these pages without charge. Photocopies of articles longer than six pages are priced at \$1.50. Whole copies of the magazine (including special issues) may be purchased for \$3.00 each from the Reader Service Department as long as the supply lasts.

ASSISTANTS

So this is what patients really think of us. 1-7-73
Efficient moves an embezzler will love you for. 1-7-177

Seeing more patients without shortchanging them. 2-4-74

Test yourself: How good a boss are you? 3-18-91
Whose practice is this, anyway? 4-15-64

The first thing my computer caught was an embezzler. 6-10-195

How to handle your toughest job as a boss. 7-8-111

Why my trusted employee betrayed a patient's confidence. 8-19-110

Don't let an idle computer bleed your practice. 8-19-147

Office staff meetings don't have to be a waste of time. 9-23-71

Hiring: Verify those credentials, check those references. 10-7-190

How to train that new assistant. 10-21-141

Retirement: One plan may not be enough. 10-28-60

Salaries: What should you pay your office staff? 11-11-258

Snub a nurse, lose your most vital ally. 11-25-93

Benefits: Pay assistants for unused sick days. 11-25-198

How sex can wreck a practice. 12-9-96

Why our nurses are champs at fielding phone questions. 12-9-107

Why was too much money coming into this practice? 12-23-60

Employees: Keeping track of your staff's performance. 12-23-107

BILLINGS

Cost-containment your patients will love you for. 5-13-207

Phone fees: Don't try to discourage phone calls by charging. 11-25-197

CARS

Neither snow, nor sleet, nor . . . 1-7-97
Tactics to save you from those highway maniacs. 1-7-203

Simple answers to tough questions about car deductions. 1-21-6

Is the Maserati Biturbo a supersteal at \$26,000? 1-21-90

Which cars will hold their value in a tricky market? 2-4-226

How to read a tire before you buy it. 2-18-209

My antique clunker broke more than my heart. 3-4-97

Think straight after a fender-bender. 3-4-169
Doctors got taken for a real ride in these luxury cars. 5-27-88

Your car needs "summerizing," too. 5-27-126

A Nova by any other name is a Toyota Corolla. 6-10-202

Just how good are Japan's best cars? 7-8-128

What's really happened to car deductions. 8-5-25

Cruising Europe at 180 kph. 8-5-121

Why I didn't sue after my car wreck. 9-9-67

The verdict on Mercury's Sable: sleek and snappy. 12-23-80

Used cars: Wallflowers on the lot may be the best buys. 9-23-172

Continued on page 190





Automobiles: When it pays to hang on to that old car. 10-21-153
Autos: Sorting great ideas from gimmicks. 10-28-144
Testing the '86 Seville: But where's the Cadillac? 11-25-66
Mazda's RX-7: This is what a sports car is supposed to be. 12-23-84
Autos: How to get the best price on that new model. 12-23-106

COLLEAGUES

Did I let cocaine destroy a young doctor? 1-7-58
Who's getting a free ride? 1-21-154
What would you do with a fresh start? 3-4-218
Spotting colleagues you don't want as partners. 4-15-59
What you do to residents can come back to haunt you. 5-13-116
What the toughest of the PROs is doing to doctors. 7-22-76
Big-city specialists are throwing away my referrals. 8-19-99
Spotting doctors who'd be wrong for your practice. 9-9-147
How a "surefire" referral can get you sued. 9-23-53
I missed all the warning signs about my new partner. 11-11-74
How to make referrals that help everyone. 11-11-249
The fine art of being a consultant. 11-25-187
Fees: Professional courtesy is still common. 12-9-187

ANNUAL SUBJECT INDEX

COLLECTIONS

What was the computer doing with this group's money? 3-18-155
Does a vasectomy add up to a leaky radiator? 4-15-143
So much for the ER as a practice builder. 8-5-91
Six shortcuts to more insurance dollars. 11-25-140

COMPETITION

Is this a Waterloo in the privileges war? 1-7-62
Family practice is becoming the first victim of competition. 2-4-29
How I beat the doctor surplus. 3-4-255
Is working nights worth it? 3-18-73
Why the Feds drove these doctors out of business. 4-1-92
How 77 doctors saved their hospital. 4-15-114
How many health plans can one town handle? 5-13-98
The new health-care partnership: M.D.s and D.C.s. 5-27-80
Why some practices flourish—and others flounder. 6-10-78
Suppose your hospital bought an 89-doctor clinic. 7-8-149
Stay independent by joining a team. 9-9-87
One patient showed me what HMO practice is like. 9-23-93
Ways you can win the privileges game. 9-23-115
The contract-medicine boom gets louder. 10-21-57
Patients deserve the facts about those walk-in clinics. 11-11-31
Will you have to join a hospital chain to survive? 11-25-164

CORPORATIONS

My pension plan got healthy when the experts got out. 1-21-175
Get the IRS on your side from the start. 5-13-111
Is the wrong kind of corporation costing you money? 7-8-121
The rules for this tax break are tougher than ever. 8-19-53
Learn your rights before you lease. 9-23-99
Defined-benefit plans: Some of the glitter is glitz. 10-7-85
Incorporation: Loose ends that can hang you in an audit. 10-28-136

DRUGS

Did I let cocaine destroy a young doctor? 1-7-58
How I boosted my earnings 40 percent. 2-4-161
My drug habit cost me \$650,000 and a chunk of my life. 2-18-148
How we proved the plaintiff was lying about me. 9-9-62
When OTC spells malpractice. 10-7-107
Health-food stores are harming our patients. 12-9-27

Continued on page 192

Transderm-Nitro®

(nitroglycerin)
Transdermal Therapeutic System

BRIEF SUMMARY (FOR FULL PRESCRIBING INFORMATION,
SEE PACKAGE INSERT)

INDICATIONS AND USAGE

This drug product has been conditionally approved by the FDA for the prevention and treatment of angina pectoris due to coronary artery disease. The conditional approval reflects a determination that the drug may be marketed while further investigation of its effectiveness is undertaken. A final evaluation of the effectiveness of the product will be announced by the FDA.

CONTRA-INDICATIONS

Intolerance of organic nitrate drugs, marked anemia, increased intracranial pressure or increased intracranial pressure.

WARNINGS

In patients with acute myocardial infarction or congestive heart failure, Transderm-Nitro system should be used under careful clinical and/or hemodynamic monitoring.

In terminating treatment of anginal patients, both the dosage and frequency of application must be gradually reduced over a period of 4 to 6 weeks to prevent sudden withdrawal reactions, which are characteristic of all vasodilators in the nitroglycerin class.

Transdermal nitroglycerin systems should be removed before attempting defibrillation or cardioversion because of the potential for altered electrical conductivity which may enhance the possibility of arcing, a phenomenon associated with the use of defibrillators.

PRECAUTIONS

Symptoms of hypotension, such as faintness, weakness or dizziness, particularly orthostatic hypotension may be due to overdose. When these symptoms occur, the dosage should be reduced or use of the product discontinued.

Transderm-Nitro system is not intended for immediate relief of anginal attacks. For this purpose occasional use of the sublingual preparations may be necessary.

ADVERSE REACTIONS

Transient headaches are the most common side effect, especially when higher doses of the drug are used. These headaches should be treated with mild analgesics while Transderm-Nitro therapy is continued. When such headaches are unresponsive to treatment, the nitroglycerin dosage should be reduced or use of the product discontinued.

Adverse reactions reported less frequently include hypotension, increased heart rate, faintness, flushing, dizziness, nausea and vomiting. These symptoms are attributable to the known pharmacologic effects of nitroglycerin, but may be symptoms of overdose. When they persist the dose should be reduced or use of the product discontinued. In some patients, dermatitis may occur.

DOSEAGE AND ADMINISTRATION

The therapy should be initiated with application of one Transderm-Nitro system to the desired area of skin. Most patients prefer the chest. If it fails to interfere with system adhesion or removal, it can be clipped prior to placement of the system. Each system is designed to remain in place for 24 hours, and each successive application should be to a different skin area. Transderm-Nitro system should not be applied to the distal parts of the extremities.

The usual dosage is one Transderm-Nitro 5 system every 24 hours. Some patients, however, may require the Transderm-Nitro 10 system. If a single Transderm-Nitro 5 system fails to provide adequate clinical response, the patient should be instructed to remove it and apply either two Transderm-Nitro 5 systems or one Transderm-Nitro 10 system. More systems may be added as indicated by continued careful monitoring of clinical response. The Transderm-Nitro 2.5 system is useful principally for decreasing the dosage gradually, though it may provide adequate therapy for some patients when used alone.

The optimal dosage should be selected based upon the clinical response, side effects, and the effects of therapy upon blood pressure. The most sustainable decrease in resting blood pressure that is not associated with clinical symptoms of hypotension especially during orthostasis indicates the optimal dosage. To decrease adverse reactions, the size and/or number of systems should be tailored to the individual patient's needs. Do not store above 66°F (30°C).

PATIENT INSTRUCTIONS FOR APPLICATIONS

A patient leaflet is supplied with the systems.

HOW SUPPLIED

	Total System Rated	Nitroglycerin in System	System Size	Carton Size
2.5 mg/24 hr	12.5 mg	5 cm ²	30 Systems (NDC 0083-2025-26) *100 Systems (NDC 0083-2025-30)	
5 mg/24 hr	25 mg	10 cm ²	30 Systems (NDC 0083-2105-26) *100 Systems (NDC 0083-2105-30)	
10 mg/24 hr	50 mg	20 cm ²	30 Systems (NDC 0083-2105-30) *100 Systems (NDC 0083-2110-26)	
15 mg/24 hr	75 mg	30 cm ²	30 Systems (NDC 0083-2110-30) *100 Systems (NDC 0083-2115-30)	

*Hospital Pack 100's

Dist. by:

CIBA Pharmaceutical Company
Division of CIBA-GEIGY Corporation
Summit, New Jersey 07901

Printed in U.S.A. 829-2429-A

C85-35 (Rev. 11/85)

C I B A

EDUCATION

What you do to residents can come back to haunt you. 5-13-116

We gave our kids the advantages of public school. 10-21-107

The right way to build a college fund. 11-11-169

EQUIPMENT

My time-saver turned out to be a patient-pleaser. 1-21-61

What the ASIM found out about computers. 1-21-183

Seeing more patients without shortchanging them. 2-4-74

Don't just cuss when the computer goes down. 3-4-121

Are mini-TVs worth a look? 3-18-121

What was the computer doing with this group's money? 3-18-155

Linking up with the information explosion. 4-15-164

The first thing my computer caught was an embezzler. 6-10-195

Keeping the beat while you push your body. 6-24-128

My quick route to a tough diagnosis. 7-8-101

You may have an investment expert at your fingertips. 7-22-101

Is it time to tune in on space? 7-22-155

The rules for this tax break are tougher than ever. 8-19-53

Don't let an idle computer bleed your practice. 8-19-147

Tax strategy: Don't wait for Washington to cut your bill. 10-28-28

Could we save our practice from bankruptcy? 11-11-191

Do you really know what you own? 11-11-209

I swore I'd never computerize. Then ... 11-25-127

Get the best of the new high-tech TV systems. 12-9-85

ESTATE PLANNING

Estate-planning mistakes that can trap your family. 5-13-232

When you should break the estate-planning rules. 6-10-89

Living together is never having to say "I owe you." 6-24-135

The last good deed you can do for your spouse. 8-5-80

Test your estate-planning skill before your heirs get hurt. 9-9-183

How to get the very most from your life insurance. 10-21-81

Estate planning: Eight questions you'd better answer today. 10-28-94

Millionaires slash estate taxes—and you can too. 12-9-117

Why you need a will from Day One of practice. 12-23-99

ETHICS

The doctor who refused to be bluffed by bigots. 2-18-223

Why I don't do abortions anymore. 3-4-60

Ethical dilemma: What would protect my patient from sexual abuse? 3-18-74; Would the truth kill this patient? 10-7-98

Profits just have to take a back seat to ethics. 10-21-21

FAMILY

Choosing the right camp for your kids. 1-21-117

Equal pay for different work saved our marriage. 3-4-95

What you can do for the family of a teen-age suicide. 2-4-204

The toughest battle against cancer I've ever managed. 2-18-125

How medical families spend their money: "We're twice as happy on half the money," 3-4-70; "We try to put more into the community than we take out," 7-22-84; "Acquiring possessions doesn't interest us." 12-9-60

"My work is just as important as yours." 4-1-66

Estate-planning mistakes that can trap your family. 5-13-232

The last good deed you can do for your spouse. 8-5-80

Should games children play include the stock market? 8-19-84

Test your estate-planning skill before your heirs get hurt. 9-9-183

Help me fix this practice or help me sell it. 10-21-46

We gave our kids the advantages of public school. 10-21-107

Estate planning: Eight questions you'd better answer today. 10-28-94

A doctor's AIDS heartbreak: "Well, Dad, I finally have it." 12-23-48

FEES

I collect \$36,000 a year for phone advice. 1-7-169

How many nasty surprises did you give patients today? 2-4-185

What's coming after the Medicare freeze. 3-18-31

How insurers get back at high-charging doctors. 3-18-64

Hell will freeze before I take Medicare assignment! 6-10-68

"Doctor, you've violated the fee freeze." 7-22-167

Are you paying for the Blues' new prosperity? 8-5-50

Every Wednesday, I take a vacation from red tape. 9-9-127

Who's doing the best job of holding down fees? 10-7-137

GOVERNMENT AND POLITICS

Washington outlook: a long, cold year for doctors. 1-7-29

ANNUAL SUBJECT INDEX

Medical quackery is still a growth industry. 2-18-70
The elderly: How you'll feel their political muscle. 4-29-50; Uncle Sam is tightening the screws on them—and you. 4-29-62
Meet a doctor who didn't let bureaucrats kick him around. 5-13-253

GOVERNMENT MEDICINE

Washington outlook: a long, cold year for doctors. 1-7-29
What the prepaid-care "boom" looks like from the inside. 1-21-103
I was convicted before I got to court. 2-4-60
Why Medicare's HMO express jumped the tracks. 3-4-29
Medicare games just get sillier and sillier. 3-4-131
What's coming after the Medicare freeze. 3-18-31
How bad doctors dodge discipline. 3-18-240
Count me out of the home-care boom. 4-15-87
The elderly: Sifting fact from myth. 4-29-34;
What they really want from you. 4-29-44; How you'll feel their political muscle. 4-29-50; Uncle Sam is tightening the screws on them—and you. 4-29-62; Will fee-for-service lose out? 4-29-76; The big pitch from big clinics. 4-29-92;
Where doctors and patients are winning the cost battle. 4-29-112; You'd better learn to love home care. 4-29-127; How to give them what they need. 4-29-142
"Hell will freeze before I take Medicare assignment!" 6-10-68
Will patient confidentiality survive this Medicaid challenge? 7-22-37
What the toughest of the PROs is doing to doctors. 7-22-76
"Doctor, you've violated the fee freeze." 7-22-167
Why rural hospitals are going down for the count. 8-19-25
Every Wednesday, I take a vacation from red tape. 9-9-127
Can a Medplan force my doctor client to pay \$771,000? 9-23-40
Where doctors turned DRG into black ink. 11-11-107

HEALTH INSURANCE

Washington outlook: a long, cold year for doctors. 1-7-29
What the prepaid-care "boom" looks like from the inside. 1-21-103
Why Medicare's HMO express jumped the tracks. 3-4-29
How to finish first at the bargaining table. 3-4-91
How insurers get back at high-charging doctors. 3-18-64
Why the Feds drove these doctors out of business. 4-1-92
The elderly: Sifting fact from myth. 4-29-34; Uncle Sam is tightening the screws on them—and you. 4-29-62; Will fee-for-service lose out? 4-29-76; The big pitch from big clinics. 4-29-92

How many health plans can one town handle? 5-13-98
At last! Fee-for-service has something to celebrate. 6-24-176
Can IPAs save small practices? 7-22-176
Are you paying for the Blues' new prosperity? 8-5-50
Stay independent by joining a team. 9-9-87
One patient showed me what HMO practice is like. 9-23-93
For investors, a silver lining in the hospital-cost cloud. 10-7-27
The contract-medicine boom gets louder. 10-21-57
We made a health insurer face the medical facts. 11-11-202
Six shortcuts to more insurance dollars. 11-25-140

HOME

Could a nice mansion like this really be haunted? 2-4-243
In home-buying, everyone has his own set of rules. 3-4-142
When—and where—to stake your retirement claim. 5-13-92
This kind of loan can be borrowing trouble. 6-24-59
Forget the heated pool. What I need is a cold shower. 7-22-127
Here's a quick fix when remodeling goes wrong. 9-9-119
Moving: Simple rules to make it a cinch. 10-7-192
Home buying: How to cut your risk with a warranty. 10-21-149
Your home: What a little luxury will cost. 10-28-170
Do you really know what you own? 11-11-209
Home insurance: Don't play penny-wise with your coverage. 12-9-188

HOSPITALS

Is this a Waterloo in the privileges war? 1-7-62
What will you be worth to your hospital under DRG? 1-7-141
How you'll feel the money squeeze on hospitals. 2-4-117
The biggest malpractice sellout ever. 2-18-194
An up-close look at emergency medicine specialists. 3-4-188
When the ER calls, I don't always go. 3-18-183
How 77 doctors saved their hospital. 4-15-114
Could your malpractice insurer's files cut off your privileges? 5-13-88
How many health plans can one town handle? 5-13-98
What you do to residents can come back to haunt you. 5-13-116
Cost-containment your patients will love you for. 5-13-207
Your surprising ally in a privileges fight. 6-10-100
Cost-containment makes my patient my enemy. 7-8-25

Suppose your hospital bought an 89-doctor clinic. 7-8-149
What the toughest of the PROs is doing to doctors. 7-22-76
Beware the legal booby traps of hospital committees. 7-22-110
So much for the ER as a practice builder. 8-5-91
Why rural hospitals are going down for the count. 8-19-25
What competition can do to peer review. 8-19-122
It's time we found out how good our referral doctors are. 9-9-30
Where doctors can't confront peers who accuse them. 9-9-96
Who's to blame for this health-spending spree? 9-23-54
Ways you can win the privileges game. 9-23-115
For investors, a silver lining in the hospital-cost cloud. 10-7-27
This doctor got his privileges back—plus \$5.95 million. 10-7-75
Balloons in the CCU. 11-11-68
Where doctors turned DRG into black ink. 11-11-107
And here's an entire hospital that moves. 11-11-183
Snub a nurse, lose your most vital ally. 11-25-93
Will you have to join a hospital chain to survive? 11-25-164
Peer review: A double whammy in California. 12-23-79

HUMOR

What a "letter to shareholders" really says. 2-18-141
Yes sir, that's my fetus! 5-13-153
Okay, so I'm not Marcus Welby. 5-27-143
How I got pinched in my piaster. 10-7-124
Things they never warned me about in medical school. 12-23-59

INCOME AND EXPENSES

Could this doctor ever have enough money? 2-4-54
It's great to be an otolaryngologist these days. 2-4-192
Why the gender gap in earnings remains huge. 2-18-174
An up-close look at emergency medicine specialists. 3-4-188
Where savings should show up on your '84 return. 3-4-228
How I got a fair price for my practice. 3-18-141
Better mailing systems to beat higher rates. 4-15-133
Doctors' earnings: the year of the big surprise. 9-9-194
Net worth: Measure your assets—and make them measure up. 10-28-14; Tax strategy: Don't wait for Washington to cut your bill. 10-28-28
Practice costs: Can you regain control? 11-11-222
Continued on page 196

TAGAMET® brand of CIMETIDINE

Before prescribing, see complete prescribing information in SK&F LAB CO. literature or *PDR*. The following is a brief summary.

Indications: 'Tagamet' (brand of cimetidine) is indicated in the short-term treatment of active duodenal ulcer; in prophylactic use at reduced dosage, to prevent recurrence of duodenal ulcer in patients likely to need surgical treatment, such as those with a history of recurrence or complications and those with concomitant illness in whom surgery would constitute a greater than usual risk (limitation to this population is recommended because the consequences of use beyond one year of continuous 'Tagamet' therapy are not known); in the short-term treatment of active benign gastric ulcer (there is no information concerning usefulness of treatment periods of longer than 8 weeks); and in the treatment of pathological hypersecretory disorders (i.e., Zollinger-Ellison syndrome, systemic mastocytosis and multiple endocrine adenomas). In active duodenal ulcer, concomitant antacids should be given as needed for relief of pain; however, simultaneous administration is not recommended.

Contraindications: There are no known contraindications to the use of 'Tagamet'.

Precuations: While a weak antiandrogenic effect has been demonstrated in animals, 'Tagamet' has been shown to have no effect on spermatogenesis, sperm count, motility, morphology or *in vitro* fertilizing capacity in humans.

In a 24-month toxicity study in rats at doses levels approximately 9 to 56 times the recommended human dose, benign Leydig cell tumors were seen. These were common in both the treated and control groups, and the incidence became significantly higher only in the aged rats receiving 'Tagamet'.

Rare instances of cardiac arrhythmias and hypotension have been reported following the rapid administration of 'Tagamet' HCl (brand of cimetidine hydrochloride) injection by intravenous bolus.

Symptomatic response to 'Tagamet' therapy does not preclude the presence of a gastric malignancy. There have been rare reports of transient healing of gastric ulcers despite subsequently documented malignancy.

Reversible confusional states have been reported on occasion, predominantly in severely ill patients.

'Tagamet' has been reported to reduce the hepatic metabolism of warfarin-type anticoagulants, phenytoin, propranolol, chloridiazepoxide, diazepam, lidocaine, theophylline and metronidazole. Clinically significant effects have been reported with the warfarin anticoagulants; therefore, close monitoring of prothrombin time is recommended, and adjustment of the anticoagulant dose may be necessary when 'Tagamet' is administered concomitantly. Interaction with phenytoin, lidocaine and theophylline has also been reported to produce adverse clinical effects.

Lack of experience to date precludes recommending 'Tagamet' for use in pregnant patients, women of childbearing potential, nursing mothers or children under 16 unless anticipated benefits outweigh potential risks; generally, nursing should not be undertaken in patients taking the drug since cimetidine is secreted in human milk. Decreased white blood cell counts have been reported in 'Tagamet'-treated patients who also received drugs and/or treatment known to produce neutropenia.

Adverse Reactions: Diarrhea, dizziness, constipation, headache, and general malaise. Reversible arthralgia, myalgia and exacerbation of joint symptoms in patients with preexisting arthritis have been reported. Reversible confusional states (e.g., mental confusion, agitation, psychosis, depression, anxiety, hallucinations, disorientation), predominantly in severely ill patients, have been reported. Reversible impotence in patients with pathological hypersensitivity disorders receiving 'Tagamet', particularly in high doses, for at least 12 months, has been reported. Reversible alopecia has been reported very rarely. Decreased white blood cell counts in 'Tagamet'-treated patients (approximately 1 per 100,000 patients), including agranulocytosis (approximately 3 per million patients), have been reported, including a few reports of reactivation on rechallenge. These patients generally had serious concomitant illnesses and received drugs and/or treatment known to produce neutropenia. Thrombocytopenia (approximately 3 per million patients) and a few cases of aplastic anemia have also been reported. Increased serum transaminase and creatinine, as well as rare cases of fever, interstitial nephritis, urinary retention, pancreatitis and allergic reactions, including hypersensitivity vasculitis, have been reported. Reversible adverse hepatic effects, cholestatic or mixed cholestatic/hepatitis, predominantly in children, have been reported rarely. Because of the predominance of cholestatic features, severe parenchymal injury is considered highly unlikely. A single case of biopsy-proven periportal hepatic fibrosis in a patient receiving 'Tagamet' has been reported.

How Supplied: Pale Green Tablets: 200 mg, tablets in bottles of 100; 300 mg, tablets in bottles of 100 and Single Unit Packages of 100 (intended for institutional use only); 400 mg, tablets in bottles of 60 and Single Unit Packages of 100 (intended for institutional use only). Liquid: 300 mg/5 mL (300 mg/5 mL) in amber glass bottles and in single-dose units (300 mg/5 mL), in packages of 10 (intended for institutional use only).

Injection: 300 mg/1 mL in single-dose vials and in 8 mL multiple-dose vials, in packages of 10, and in single-dose, prefilled disposable syringes.

Date of issuance Aug. 1985

BRS-TC:159

References

- Burland, W.L., et al.: *Postgrad. Med. J.* 56:173-176 (Mar.) 1980.
- Berstad, A., et al.: *Scand. J. Gastroenterol.* 14:827-832, 1979.
- Salera, M., et al.: *Ital. J. Gastroenterol.* 11:133, 1979.
- Salera, M., et al.: *N. Engl. J. Med.* 311:689-693 (Sept. 13) 1984.
- Bianchi-Porri, G., and Petrillo, N.: *Ital. J. Gastroenterol.* 11:181-183, 1979.
- Data on file, SK&F Medical Department.
- Kratochvil, P., and Brandstatter, G.: *Med. Welt*, 34:1380-1382, 1963.
- Watanabe, A., et al.: *Lancet* E:15 (Jan. 12) 1985.
- Bianchi-Porri, G.: "Tagamet": New Dimensions. A Symposium Proceedings. XII International Congress of Gastroenterology (Lisbon), Sept. 1984, pp. 33-38.
- Weber, K. B., et al.: *Gastroenterol.* 16:697-698, 1974.
- Freed, J.W., et al.: In *Upper Gastrointestinal Diseases: Clinical Challenges*, Vol. 1, No. 5, 1985, 12. Grant, G.R., et al.: *Lancet* 1:787-788 (Apr. 3) 1982.
- Fisch, A., et al.: *Gastroenterology* 89:57-61, 1985.
- Brandizi, D., et al.: *Scand. J. Gastroenterol.* 19:457-460, 1984.
- Okada, M.; Nagao, S., and Imai, S.: In 'Tagamet' New Dimensions: A Symposium Proceedings. XII International Congress of Gastroenterology (Lisbon), Sept. 1984, pp. 105-113.
- El-Ghaffar, Y.A.: *Gastroenterology*, 7th World Congress, Abstract 1216a, Stockholm, 1982.

ANNUAL SUBJECT INDEX

INSURANCE

I got a lot more insurance for a lot less money. 2-4-175

Think straight after a fender-bender. 3-4-169
Is there any real hope for malpractice reform? 4-15-23

Why a good appraiser is a great bargain. 4-15-63
How much life insurance do you need? Fill in the blanks. 4-15-97

What happens when your malpractice carrier won't let you settle? 4-15-178

Could your malpractice insurer's files cut off your privileges? 5-13-88

Do you own any of this worthless insurance? 5-13-157

Malpractice: Will the new premium hikes pull you under? 5-27-128

Malpractice reform: doctors 4, lawyers 0. 6-10-31

Does truth-in-advertising extend to lawyers? 6-10-209

Why I didn't sue after my car wreck. 9-9-67

Don't let a life insurance agent's bull stampede you. 9-23-155

How to get the very most from your life insurance. 10-21-81

Annuities: You can't call them old-fashioned anymore. 10-28-82

Life insurance: Can your policies survive this stress test? 10-28-106

Business insurance: Fill in the gaps, but hold down the price. 10-28-126

The right way to build a college fund. 11-11-169

Do you really know what you own? 11-11-209

Trip insurance: Cover losses from sudden cancellation. 11-25-198

How to shop for your most important insurance. 12-9-181

Home insurance: Don't play penny-wise with your coverage. 12-9-188

INVESTMENTS

Where the smart money's going for Reagan's second term. 1-21-31

The sunny seminars that rained on doctors. 1-21-66

My pension plan got healthy when the experts got out. 1-21-175

Where the traps are in the new capital gains rules. 2-4-215

How to avoid being flattened by the flat tax. 2-18-27

What a "letter to shareholders" really says. 2-18-141

Phantom tax shelters that tripped up 100 doctors. 3-18-68

Keep your profits steady when the investment scene gets shaky. 4-1-60

Why some doctors spotted a giant scam—and others didn't. 4-1-140

Today's tax shelter: Better deals or prettier packages? 4-15-54

Why a good appraiser is a great bargain. 4-15-63

Your broker's CDs may be better than the bank's. 5-27-87

Could your financial plan weather a crisis? 5-27-154

Who milks whom in these tax shelters? 5-27-187

Healthy survivors of the tax-shelter crackdown. 6-10-72

In search of the perfect investment manager. 6-10-222

Cutting the risks when you invest in gold. 6-24-86

When a broker won't let go of your account. 6-24-189

Never buy common stocks. 8-5-56

Investments that rise when the dollar sinks. 8-5-69

"My, what big tax shelters you have, Grandma!" 8-5-124

Spot that investment trend before it starts. 8-19-54

How I built a better tax shelter. 9-9-107

Profits just have to take a back seat to ethics. 10-21-21

Retirement: One plan may not be enough. 10-28-60

Annuities: You can't call them old-fashioned anymore. 10-28-82

Cash reserves: Take a good look at financial supermarkets. 10-28-158

Investments: Which stocks will outrun the bull market? 10-28-182

How a private eye checks out tax shelters. 11-11-60

Guess who the top investment managers are now. 11-25-31

Toys soldiers never die; they just appreciate. 12-9-94

What could make your tax shelter a target for the IRS. 12-21-25

Bonds

Where the smart money's going for Reagan's second term. 1-21-31

Keep your profits steady when the investment scene gets shaky. 4-1-60

Never buy common stocks. 8-5-56

Junk bonds: finding treasures in the trash. 10-21-95

Investments: Which stocks will outrun the bull market? 10-28-182

Mutual funds

Little funds that grow big profits. 5-13-123

In search of the perfect investment manager. 6-10-222

Cutting the risks when you invest in gold. 6-24-86

Investments that rise when the dollar sinks. 8-5-69

Your safest first step into the stock market. 10-7-181

How a pro invests: Be a realist—or be a loser. 12-9-56

Is that mutual fund telling you the whole truth? 12-23-54

Real estate

Where the smart money's going for Reagan's second term. 1-21-31

Continued on page 198

Brief Summary: ANAPROX® (naproxen sodium)
Indications: Relief of mild to moderate pain; treatment of primary dysmenorrhea.
Centralindications: Patients who have had allergic reactions to NAPROSYN or ANAPROX or in whom aspirin or other NSAIDs induce the syndrome of asthma, rhinitis, and nasal polyps.
Warnings: GI bleeding, sometimes severe, and occasionally fatal, has been reported. Do not give to patients with active peptic ulcer unless potential benefit outweighs risk. Administer to those and others with history of GI disease only under close supervision.

Precautions: DO NOT GIVE NAPROSYN (NAPROXEN) CONCOMITANTLY WITH ANAPROX® (NAPROXEN SODIUM) SINCE BOTH CIRCULATE IN PLASMA AS THE NAPROXEN ANION. Because antihistaminic reactions usually occur in patients with a history of such reactions, question patients for any unusual types of urticaria, and monitor associated with NSAIDs before starting therapy. If such symptoms occur, discontinue the drug. Acute interstitial nephritis with hematuria, proteinuria, and nephrotic syndrome has been reported. Patients with impaired renal function, heart failure, liver dysfunction, taking diuretics, and the elderly are at greater risk of overt renal decompensation. If this occurs, discontinue the drug. Use with caution and monitor serum creatinine and/or creatinine clearance in patients with significantly impaired renal function. Use caution in patients with baseline creatinine clearance less than 20 mL/min. Use caution when high doses are required in the elderly or in patients with chronic alcoholic liver disease or cirrhosis. With NSAIDs, borderline elevations of liver tests may occur in up to 15% of patients. They may progress, remain unchanged, or be transient with continued therapy. Elevations of SGPT or SGOT occurred in controlled clinical trials in less than 1% of patients. Severe hypersensitivity reactions, including anaphylaxis and fatal hepatitis, have been reported rarely. If other disease develops or if systemic manifestations occur (e.g., eosinophilia or rash), discontinue therapy. If steroid dosage is reduced or eliminated during therapy, do so slowly and observe patients closely for adverse effects, including adrenal insufficiency and exacerbation of arthritis symptoms. Determine hemoglobin values frequently for patients with initial values of 10 grams or less who receive long-term therapy. Peripheral edema has been reported. For patients with restricted sodium intake, note that each tablet contains approximately 25 mg (1 mEq) sodium. Use with caution in patients with fluid retention, hypertension or heart failure. The drug's antipyretic and anti-inflammatory activities may reduce fever and inflammation, diminishing their diagnostic value. Conduct ophthalmic studies soon after starting therapy and at periodic intervals if the drug is used for an extended period.

Information for Patients: Patients should use caution for activities requiring coordination if they experience drowsiness, dizziness, vertigo or disorientation during therapy.

Drug Interactions: Use caution when giving concomitantly with coumarin-type anticoagulants; a hydantoin, sulfonamide or sulfonylurea; furosemide; lithium; beta-blockers; probenecid; or methotrexate.

Drug/Laboratory Test Interactions: The drug may decrease platelet aggregation and prolong bleeding time or increase urinary values for 17-ketogenic steroids. Temporarily stop therapy for 72 hours before doing adrenal function tests. The drug may interfere with urinary assays of SHIAA.

Carcinogenesis: A 2-year rat study showed no evidence of carcinogenicity.

Pregnancy: Category B. Do not use during pregnancy unless clearly needed. Avoid use during late pregnancy.

Nursing Mothers: Avoid use in nursing mothers.

Pediatric Use: Indications and dosage have not been established.

Adverse Reactions: Incidence Greater Than 1%: GI: The most frequent complaints related to the GI tract: constipation, diarrhea, abdominal pain, "gas," dyspepsia, diarrhea, abdominal cramps, abdominal pain, constipation, CNS: headache, dizziness, drowsiness; lips, tongue, teeth, gingivitis, dermatologic: itching (pruritis); skin eruptions; ecchymoses; sweating, purpura. Special Senses: tinnitus; hearing disturbances, visual disturbances. Cardiovascular: edema, dyspnea, palpitations. General: thirst, "heat"; once reported reaction 3%-9%. Where unreported once less than 3%: Incidence Less Than 1%: Possible Relationship: GI: abnormal liver function tests, GI bleed and/or perforation, hematemesis, jaundice, melaena, peptic ulceration with bleeding and/or perforation, vomiting. R&D: glomerular nephritis, hematuria, interstitial nephritis, nephritic syndrome, renal disease. Hematologic: eosinophilia, granulocytopenia, leukopenia, thrombocytopenia. CNS: depression, dream abnormalities, inability to concentrate, insomnia, malaise, myalgia and muscle weakness. Dermatologic: alopecia, skin rashes. Special Senses: hearing impairment. Cardiovascular: congestive heart failure. Respiratory: exudative pneumonitis. General: anaphylactic reaction, menstrual disorders, dysmenorrhea (child and female). General Relationship Unknown: Hematuria, agranulocytosis, aplastic anemia, hemolytic anemia. CNS: cognitive dysfunction. Dermatologic: urticaria. GI: ulcerative stomatitis. General: angioneurotic edema, hyperglycemia, hypoglycemia.

Overdosage: May have drowsiness, heartburn, indigestion, nausea, vomiting. Empty stomach and use usual supportive measures. Prompt administration of 5 grams activated charcoal may reduce drug absorption.

Dosage and Administration for Mild to Moderate Pain, Dysmenorrhea and Acute Tendinitis and Bursitis: The recommended starting dose is two 275 mg tablets, followed by one 275 mg tablet every 6 to 8 hours, as required. The total daily dose should not exceed 5 tablets (1375 mg).

Caution: Federal law prohibits dispensing without prescription.

See package insert for full Prescribing Information.

#22

Revised 7/85

© 1985 Syntex Laboratories, Inc.



SYNTEX LABORATORIES, INC.
PALO ALTO, CALIFORNIA 94304

ANNUAL SUBJECT INDEX

INVESTMENTS—real estate (cont.)

Meet the guys who'll make—or break—your real estate deal. 4-1-157

When—and where—to stake your retirement claim. 5-13-92

Healthy survivors of the tax-shelter crackdown. 6-10-72

Time-sharing switching: A bonus or a bane? 6-24-111

The new rules for finding real estate profits. 7-8-68

Play to win in a real estate showdown. 8-5-102

Real estate: How to prosper with fewer tax breaks. 10-28-50

My biggest tax break: a landmark office. 11-11-151

Stocks

Will the hospital cost-squeeze produce an investor's bonanza? 1-7-81

Is this portfolio stuffed with profits? 1-7-173

Where the smart money's going for Reagan's second term. 1-21-31

Five fast ways to zero in on stock winners. 3-18-265

Finding utility stocks with the brightest promise. 6-10-162

In search of the perfect investment manager. 6-10-222

Cutting the risks when you invest in gold. 6-24-86

10 experts pick their single favorite stocks. 7-8-92

Never buy common stocks. 8-5-56

Investments that rise when the dollar sinks. 8-5-69

Should games children play include the stock market? 8-19-84

Media stocks: There's plenty of good news left. 9-9-216

Look behind bad news for a good stock. 9-23-46

For investors, a silver lining in the hospital-cost cloud. 10-27-27

All stock markets are not created equal. 10-7-58

Investments: Which stocks will outrun the bull market? 10-28-182

Put a cash cow in your pension plan. 11-11-93

Guess who the top investment managers are now. 11-25-31

How a pro invests: Be a realist—or be a loser. 12-9-56

Will this keep you off the investment roller coaster? 12-23-83

LAW

"A loaded gun waiting to go off." 1-21-56

I was convicted before I got to court. 2-4-60

The biggest malpractice sellout ever. 2-18-194

The doctor who refused to be bluffed by bigots. 2-18-223

Think straight after a fender-bender. 3-4-169

A tax gamble you'll never want to take. 3-18-197

How bad doctors dodge discipline. 3-18-240

Is there any real hope for malpractice reform? 4-15-23

Real estate brokers are feeling the malpractice heat. 5-13-144

Malpractice reform: doctors 4, lawyers 0. 6-10-31

My malpractice lesson: Never assume anything. 6-24-60

At last! Fee-for-service has something to celebrate. 6-24-176

Don't let "friendly witnesses" ruin your malpractice defense. 7-8-85

Will patient confidentiality survive this Medicaid challenge? 7-22-37

I show clients what it's like to go to court. 7-22-140

How to keep a lawyer from running up your bill. 7-22-191

Can your specialty society shut you out? 8-5-60

Play to win in a real estate showdown. 8-5-102

How malpractice arbitration backfired on a doctor. 8-19-48

What competition can do to peer review. 8-19-122

Where doctors can't confront peers who accuse them. 9-9-96

Here's a quick fix when remodeling goes wrong. 9-9-119

Give medical policing boards freedom, not rules. 9-23-23

Can a Medplan force my doctor client to pay \$771,000? 9-23-40

Learn your rights before you lease. 9-23-99

Can you really predict what a juror will think? 9-23-136

This doctor got his privileges back—plus \$5.95 million. 10-7-75

Do contingency fees really cause malpractice suits? 10-21-52

Incorporation: Loose ends that can hang you in an audit. 10-28-136

Diary of an unfounded malpractice suit. 11-11-116

How many nasty surprises lurk in your office lease? 11-25-151

Why did the system let this doctor keep practicing? 12-9-68

What to be ready for if you testify in a child-abuse trial. 12-9-133

Peer review: A double whammy in California. 12-23-79

LOCATION AND DISTRIBUTION

Why the gender gap in earnings remains huge. 2-18-174

How I beat the doctor surplus. 3-4-255

How many health plans can one town handle? 5-13-98

Meet a doctor who didn't let bureaucrats kick him around. 5-13-253

Location: How to find a new place to practice. 11-21-258

MALPRACTICE

My malpractice defense? Back to basics. 1-7-52

The biggest malpractice sellout ever. 2-18-194

Continued on page 200

Limbrol® Tranquizer-Antidepressant

Before prescribing, please consult complete product information, a summary of which follows:

Indications: Relief of moderate to severe depression associated with moderate to severe anxiety.
Contraindications: Known hypersensitivity to benzodiazepines or tricyclic antidepressants. Do not use with monoamine oxidase (MAO) inhibitors or within 14 days following discontinuation of MAO inhibitors since hyperpyrexia crises, severe convulsions and deaths have occurred with concomitant use; then initiate cautiously, gradually increasing dosage until optimal response is achieved. Contraindicated during acute recovery phase following myocardial infarction.

Warnings: Use with great care in patients with history of urinary retention, angle-closure glaucoma. Severe constipation may occur in patients taking tricyclic antidepressants and anticholinergic-type drugs. Closely supervise cardiovascular patients. (Arrhythmias, sinus tachycardia and prolongation of conduction time reported with use of tricyclic antidepressants, especially high doses. Myocardial infarction and stroke reported with use of this class of drugs.) Caution patients about possible combined effects with alcohol and other CNS depressants and against hazardous occupations requiring complete mental alertness (e.g., operating machinery, driving).

Usage in Pregnancy: Use of minor tranquilizers during the first trimester should almost always be avoided because of increased risk of congenital malformations as suggested in several studies.

Consider possibility of pregnancy when instituting therapy; advise patients to discuss therapy if they intend to or do become pregnant.

Since physical and psychological dependence to chlorzypoxide have been reported rarely, use caution in administering Limbrol to addiction-prone individuals or those who might increase dosage. Withdrawal symptoms following discontinuation of either component alone have been reported (nausea, headache and malaise for amitriptyline; symptoms [including convulsions] similar to those of barbiturate withdrawal for chlorzypoxide).

Precautions: Use with caution in patients with a history of seizures, in hyperthyroid patients or those on thyroid medication, and in patients with impaired renal or hepatic function. Because of the possibility of suicide in depressed patients, do not permit easy access to large quantities in these patients. Periodic liver function tests and blood counts are recommended during prolonged treatment. Amitriptyline component may block action of guanethidine or similar antihypertensives. When tricyclic antidepressants are used concomitantly with cimetidine (Tagamet), clinically significant effects have been reported involving delayed elimination and increasing steady state concentrations of the tricyclic drugs. Concomitant use of Limbrol with other psychotropic drugs has not been evaluated; however, caution is advised. Do not use for more than 4 weeks before surgery. Limit concomitant administration of ECT to essential treatment. See Warnings for precautions about pregnancy. Limbrol should not be taken during the nursing period. Not recommended in children under 12. In the elderly and debilitated, limit to smallest effective dosage to preclude ataxia, oversedation, confusion or anticholinergic effects.

Adverse Reactions: Most frequently reported are those associated with either component alone: drowsiness, dry mouth, constipation, blurred vision, dizziness and fainting. Less frequently occurring reactions include vivid dreams, impotence, tinnitus, confusion and nasal congestion. Many depressive symptoms including anorexia, fatigue, weakness, restlessness and lethargy have been reported as side effects of both Limbrol and amitriptyline. Granulocytopenia, jaundice and hepatic dysfunction have been observed rarely.

The following list includes adverse reactions not reported with Limbrol but requiring consideration because they have been reported with one or both components or closely related drugs:
Cardiovascular: Hypotension, hypertension, tachycardia, palpitations, myocardial infarction, arrhythmia, heart block, stroke.
Psychiatric: Euphoria, apprehension, poor concentration, delusions, hallucinations, hypomania and increased or decreased libido.

Neurologic: Incoordination, ataxia, numbness, tingling and paresthesias of the extremities, extrapyramidal symptoms, syncope, changes in EEG patterns.

Anticholinergic: Disturbance of accommodation, paralytic ileus, urinary retention, dilation of urinary tract.

Allergic: Skin rash, urticaria, photosensitivity, edema of face and tongue, pruritis.

Hematologic: Bone marrow depression including agranulocytosis, eosinophilia, purpura, thrombocytopenia.

Gastrointestinal: Nausea, epigastric distress, vomiting, anorexia, stomatitis, peculiar taste, diarrhea, black tongue.

Endocrine: Testicular swelling and gynecomastia in the male, breast enlargement, galactorrhea and minor menstrual irregularities in the female; elevation and lowering of blood sugar levels and syndrome of inappropriate ADH (antidiuretic hormone) secretion.

Other: Headache, weight gain or loss, increased perspiration, urinary frequency, mydriasis, jaundice, alopecia, paroxysmal swelling.

Oversatge: Immediately hospitalize patient suspected of having taken on overdose. Treatment is symptomatic and supportive. IV. administration of 1 to 3 mg physostigmine salicylate has been reported to reverse the symptoms of amitriptyline poisoning. See complete product information for manifestations and treatment.

Doseage: Individualized according to symptom severity and patient response. Reduce to smallest effective dosage when satisfactory response is obtained. Larger portion of daily dose may be taken at bedtime. Single h.s. dose may suffice for some patients. Lower dosages are recommended for the elderly.

Limbrol DS (double strength) Tablets, initial dosage of three or four tablets daily in divided doses, increased up to six tablets or decreased to two tablets daily as required. Limbrol Tablets, initial dosage of three or four tablets daily in divided doses, for patients who do not tolerate higher doses. Daily dosage of 120 mg chlorzypoxide and 12.5 mg amitriptyline (as the hydrochloride salt). Available in bottles of 100 and 500. Tel-E-Dose® packages of 100. Prescription Paks of 50.



ROCHE PRODUCTS INC.
Mondial, Puerto Rico 00701

MALPRACTICE (cont.)

When the ER calls, I don't always go. 3-18-183
Malpractice: spotting cases that could blow up in your face. 3-18-210

Is there any real hope for malpractice reform? 4-15-23

What happens when your malpractice carrier won't let you settle? 4-15-178

The malpractice storm threatens a doctors' haven. 5-13-35

Could your malpractice insurer's files cut off your privileges? 5-13-88

Let's stop kidding ourselves about defensive medicine. 5-27-39

Malpractice: Will the new premium hikes pull you under? 5-27-128

Would your malpractice defense really hold up? 5-27-174

Malpractice reform: doctors 4, lawyers 0. 6-10-31

When the patient takes over, the doctor can get sued. 6-10-111

Does truth-in-advertising extend to lawyers? 6-10-209

My malpractice lesson: Never assume anything. 6-24-60

How a lawyer decides whether to sue you for malpractice. 6-24-148

Doctors don't have the only malpractice crisis in town. 7-8-62

Don't let "friendly witnesses" ruin your malpractice defense. 7-8-85

Beware the legal booby traps of hospital committees. 7-22-110

How malpractice arbitration backfired on a doctor. 8-19-48

How we proved the plaintiff was lying about me. 9-9-62

How a "surefire" referral can get you sued. 9-23-53

Malpractice lawyers' latest bullying tactic. 10-7-54

When OTC spells malpractice. 10-7-107

Do contingency fees really cause malpractice suits? 10-21-52

Diary of an unfounded malpractice suit. 11-11-116

Why did the system let this doctor keep practicing? 12-9-68

How we beat the toughest malpractice lawyer in town. 12-23-92

MEDICAL-CARE COSTS

What will you be worth to your hospital under DRG? 1-7-141

What the prepaid-care "boom" looks like from the inside. 1-21-103

How you'll feel the money squeeze on hospitals. 2-4-117

How many nasty surprises did you give patients today? 2-4-185

Count me out of the home-care boom. 4-15-87

The elderly: Sifting fact from myth. 4-29-44

What they really want from you. 4-29-44

How you'll feel their political muscle. 4-29-50

Uncle Sam is tightening the screws on them—and you. 4-29-62

Where doctors and patients are winning the cost battle. 4-29-112

Cost-containment your patients will love you for. 5-13-207

Let's stop kidding ourselves about defensive medicine. 5-27-39

Guess where fee-for-service is flourishing now. 6-10-143

Give your needy patients more than health care. 6-10-169

Cost-containment killed my patient. 6-24-54

Cost-containment makes my patient my enemy. 7-8-25

Are you paying for the Blues' new prosperity? 8-5-50

Why rural hospitals are going down for the count. 8-19-25

The buck stops with these doctors—and they like it. 8-19-73

Where government is trying to wipe out fee-for-service. 10-7-64

Where doctors turned DRG into black ink. 11-11-107

MEDICAL PROFESSION

"A loaded gun waiting to go off." 1-21-56

Could 12 salmonellosis cases be coincidence? 2-4-130

Why the gender gap in earnings remains huge. 2-18-174

What would you do with a fresh start? 3-4-218

How bad doctors dodge discipline. 3-18-240

The good life gets better all the time. 4-1-31

The malpractice storm threatens a doctors' haven. 5-13-35

Medical mystery: The hoofbeats of a zebra. 5-13-168

Let's stop kidding ourselves about defensive medicine. 5-27-39

"If I couldn't be a doctor, I'd ..." 7-22-120

The buck stops with these doctors—and they like it. 8-19-73

It's time we found out how good our referral doctors are. 9-9-30

I saw the future—and said to hell with it. 9-9-58

Every Wednesday, I take a vacation from red tape. 9-9-127

Give medical policing boards freedom, not rules. 9-23-23

Can you really predict what a juror will think? 9-23-136

Where government is trying to wipe out fee-for-service. 10-7-64

What had the bureaucrats done with my license? 10-7-117

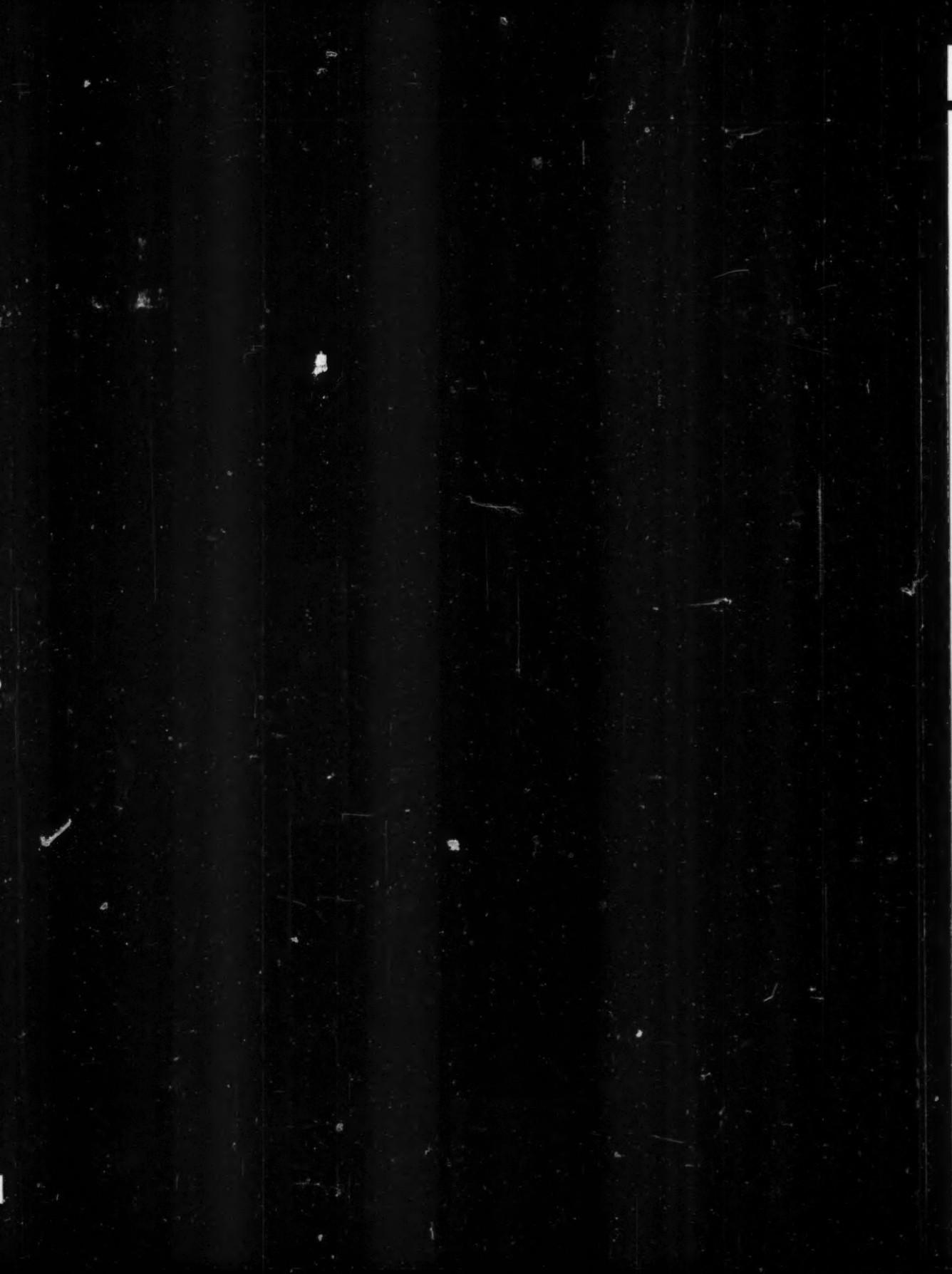
When a doctor knows he isn't good enough. 10-21-118

What puts a doctor and his patient on opposite sides? 11-25-70

Peer review: A double whammy in California. 12-23-79

OFFICE

What the ASIM found out about computers. 1-21-183



ANNUAL SUBJECT INDEX

Seeing more patients without shortchanging them. 2-4-74
The doctor who refused to be bluffed by bigots. 2-18-223
How to pack a lot of practice in a little office. 3-18-175
My long wait was a short course in practice management. 8-5-113
Learn your rights before you lease. 9-23-99
Supplies: How to avoid running out. 9-23-169
Periodicals: Subscriptions made easy. 9-23-172
My biggest tax break: a landmark office. 11-11-151
This satellite office has my practice really rolling. 11-11-179
Do you really know what you own? 11-11-209
How many nasty surprises lurk in your office lease? 11-25-151

ORGANIZED MEDICINE

Why Medicare's HMO express jumped the tracks. 3-4-29
How bad doctors dodge discipline. 3-18-240
Why the Feds drove these doctors out of business. 4-1-92
Cost-containment your patients will love you for. 5-13-207
Can your specialty society shut you out? 8-5-60
What competition can do to peer review. 8-19-122
What had the bureaucrats done with my license? 10-7-117

PARTNERSHIP, GROUP, AND SOLO PRACTICE

A good buy-sell agreement is worth its weight in legal fees. 1-21-137
Make sure that practice merger is a perfect fit. 2-18-83
My rocky road back to real medicine. 2-18-110
I hired an associate in haste—and repented at leisure. 4-1-54
Spotting colleagues you don't want as partners. 4-15-59
The elderly: The big pitch from big clinics. 4-29-92
How to take a sabbatical every three years. 5-13-138
Who was draining two-thirds of the practice gross? 5-13-193
Set a timetable for a senior doctor to phase out. 5-13-225
The new health-care partnership: M.D.s and D.C.s. 5-27-80
The practice that outgrew itself. 6-24-66
Suppose your hospital bought an 89-doctor clinic. 7-8-149
Can IPAs save small practices? 7-22-176
How a buy-out agreement hobbled my retirement. 8-5-145
What competition can do to peer review. 8-19-122
Spotting doctors who'd be wrong for your practice. 9-9-147

I missed all the warning signs about my new partner. 11-11-74
How hidden agendas can spoil a practice merger. 12-23-73

PATIENTS

So this is what patients really think of us. 1-7-73
Relocate your office without dislocating your practice. 1-7-155
My time-saver turned out to be a patient-pleaser. 1-21-61
Let your patients do your PR work. 1-21-80
Who's getting a free ride? 1-21-154
How many nasty surprises did you give patients today? 2-4-185
A new dog learns old practice tricks. 2-4-223
Medical quackery is still a growth industry. 2-18-70
If the patient has questions you can't answer. 2-18-159
The doctor who refused to be bluffed by bigots. 2-18-223
Why I don't do abortions anymore. 3-4-60
My call-in policy pays big dividends. 3-4-69
Medicare games just get sillier and sillier. 3-13
Are you strangling your practice? 3-4-151
Treating Joey's medical problems was the easy part. 3-4-175
Ethical dilemma: What would protect my patient from sexual abuse? 3-18-74; Would the truth kill this patient? 10-7-98
When you're an elderly patient's only contact. 3-18-104
Surefire steps to soothe the savage patient. 3-18-131
When the ER calls, I don't always go. 3-18-183
Malpractice: spotting cases that could blow up in your face. 3-18-210
He keeps his patients on their toes. 3-18-230
The good life gets better all the time. 4-1-31
A patient who taught me true grit. 4-1-65
A patient questionnaire that will get straight answers. 4-1-75
Count me out of the home-care boom. 4-15-87
Pump up and preserve your practice good will. 4-15-107
The elderly: Sifting fact from myth. 4-29-34; What they really want from you, 4-29-44; How you'll feel their political muscle, 4-29-50; Uncle Sam is tightening the screws on them—and you, 4-29-62; Will fee-for-service lose out? 4-29-76; The big pitch from big clinics, 4-29-92; Non-M.D.s move in, 4-29-99; Where doctors and patients are winning the cost battle, 4-29-112; You'd better learn to love home care, 4-29-127; How to give them what they need. 4-29-142
Yes sir, that's my fetus! 5-13-153
Medical mystery: The hoofbeats of a zebra. 5-13-168
I give my patients Tom Selleck—and much more. 5-13-243
Will that hot idea burn your practice? 5-27-101
When the patient takes over, the doctor can get sued. 6-10-111

Guess where fee-for-service is flourishing now. 6-10-143
Give your needy patients more than health care. 6-10-169
Relax your patients into loyalty. 6-10-217
Cost-containment killed my patient. 6-24-54
Don't sneer at your patient's wonder cure. 6-24-77
Cost-containment makes my patient my enemy. 7-8-25
My quick route to a tough diagnosis. 7-8-101
What you'll never learn unless you make house calls. 7-22-135
Nothing went right, yet my patient's still my friend. 8-5-78
So much for the ER as a practice builder. 8-5-91
My long wait was a short course in practice management. 8-5-113
Why my trusted employee betrayed a patient's confidence. 8-19-110
How we proved the plaintiff was lying about me. 9-9-62
What to do if your patient makes a pass. 9-9-83
Is this the one patient you'll never forget? 9-9-132
One patient showed me what HMO practice is like. 9-23-93
Now I'm glad my patient was so stubborn. 10-21-86
Patients deserve the facts about those walk-in clinics. 11-11-31
The best way to wind up a patient visit. 11-11-67
Balloons in the CCU. 11-11-68
Patients love my fast shuffle. 11-11-161
And here's an entire hospital that moves 11-11-183
Why we'll always need family doctors. 11-11-186
We made a health insurer face the medical facts. 11-11-202
How to make referrals that help everyone. 11-11-249
Why I can't tell patients "Everything's going to be fine." 11-25-62
Get to know your patients before you meet them. 11-25-121
The fine art of being a consultant. 11-25-187
Phone fees: Don't try to discourage phone calls by charging. 11-25-197
Health-food stores are harming our patients. 12-9-27
Why our nurses are champs at fielding phone questions. 12-9-107
What to be ready for if you testify in a child-abuse trial. 12-9-133
Fees: Professional courtesy is still common. 12-9-187
Things they never warned me about in medical school. 12-23-59
Patient relations: Helping patients to comply with treatment. 12-23-106

PERSONAL FINANCES

Six expensive surprises in the latest tax law. 1-7-188
What your colleagues can tell you about sideline businesses. 1-7-229
Continued on page 202

ANNUAL SUBJECT INDEX

PERSONAL FINANCES (cont.)

The sunny seminars that rained on doctors. 1-21-66
Could this doctor ever have enough money? 2-4-54
I got a lot more insurance for a lot less money. 2-4-175
Which cars will hold their value in a tricky market? 2-4-226
A 2-inch treasure trove of tax savings. 2-18-66
My drug habit cost me \$650,000 and a chunk of my life. 2-18-148
My bank wanted to charge extra for losing my \$40,000. 3-4-64
My antique clunker broke more than my heart. 3-4-97
In home-buying, everyone has his own set of rules. 3-4-142
Where savings should show up on your '84 return. 3-4-228
Phantom tax shelters that tripped up 100 doctors. 3-18-68
New tax breaks that make divorce less painful. 4-1-125
How much life insurance do you need? Fill in the blanks. 4-15-97
How 77 doctors saved their hospital. 4-15-114
Should you set up your own charitable foundation? 4-15-190
Little funds that grow big profits. 5-13-123
Real estate brokers are feeling the malpractice heat. 5-13-144
Do you own any of this worthless insurance? 5-13-157
Your broker's CDs may be better than the bank's. 5-27-87
Doctors got taken for a real ride in these luxury cars. 5-27-88
Could your financial plan weather a crisis? 5-27-154
Entertainment deductions that still stand up. 6-10-237
This kind of loan can be borrowing trouble. 6-24-59
I'm up to my ears in debt, and there's no way out. 6-24-169
Is that a "financial planner" or a salesman? 7-22-70
How medical families spend their money: "We try to put more into the community than we take out," 7-22-84; "Acquiring possessions doesn't interest us." 12-9-60
You may have an investment expert at your fingertips. 7-22-101
Forget the heated pool. What I need is a cold shower. 7-22-127
Investments that rise when the dollar sinks. 8-5-69
Spot that investment trend before it starts. 8-19-54
Test your estate-planning skill before your heirs get hurt. 9-9-183
Media stocks: There's plenty of good news left. 9-9-216
Your safest first step into the stock market. 10-7-181
What retirement is really like: "It took me about

five minutes to adjust," 7-8-56; "I didn't expect to make so many real friends," 9-9-68; "It's kind of a party all the time." 10-21-58
Junk bonds: finding treasures in the trash. 10-21-95
Home buying: How to cut your risk with a warranty. 10-21-149
Net worth: Measure your assets—and make them measure up. 10-28-14; Tax strategy: Don't wait for Washington to cut your bill. 10-28-28; Real estate: How to prosper with fewer tax breaks. 10-28-50; Retirement: One plan may not be enough. 10-28-60; Annuities: You can't call them old-fashioned anymore. 10-28-82; Cash reserves: Take a good look at financial supermarkets. 10-28-158; Your home: What a little luxury will cost. 10-28-170; Investments: Which stocks will outrun the bull market? 10-28-182
Do you really know what you own? 11-11-209
Guess who the top investment managers are now. 11-25-31
Millionaires slash estate taxes—and you can too. 12-9-117
Cheapie charters are great deals, if... 12-9-145
Why you need a will from Day One of practice. 12-23-99

PERSONAL LIFE

Neither snow, nor sleet, nor... 1-7-97
Is this the ultimate test of marriage? 1-7-160
Tactics to save you from those highway maniacs. 1-7-203
What your colleagues can tell you about sideline businesses. 1-7-229
Is the Maserati Biturbo a supersteal at \$26,000? 1-21-90
Choosing the right camp for your kids. 1-21-117
Would I ever be able to speak again? 1-21-132
Equal pay for different work saved our marriage. 2-4-95
Go for the green! 2-4-102
What you can do for the family of a teen-age suicide. 2-4-204
Did any OBG ever do a trickier C-section? 2-4-219
Could a nice mansion like this really be haunted? 2-4-243
My rocky road back to real medicine. 2-18-110
The toughest battle against cancer I've ever managed. 2-18-125
Where to go after you've seen it all. 2-18-130
My drug habit cost me \$650,000 and a chunk of my life. 2-18-148
I've gone to the dogs, and it's great. 2-18-164
What I learned from reading my obituary. 2-18-189
Noah had better luck getting off Ararat than we did. 3-4-110
Are mini-TVs worth a look? 3-18-121
Facing the world with map and compass. 3-18-258
"My work is just as important as yours." 4-1-66
Why a good appraiser is a great bargain. 4-15-63
Does a vasectomy add up to a leaky radiator? 4-

15-143
An island apart, a world of difference. 4-15-150
Linking up with the information explosion. 4-15-164
When—and where—to stake your retirement claim. 5-13-92
What you need to do to protect yourself abroad. 5-13-187
I saved a life—right under Lenin's nose. 5-13-214
Our low-stress, high-pleasure European vacation. 5-27-108
Okay, so I'm not Marcus Welby. 5-27-143
Why the price of art is so bloated. 6-10-128
It's Supermax to the rescue... for the 71st time. 6-10-153
The best of Hawaii—from doctors who know. 6-10-182
Time-share switching: A bonus or a bane? 6-24-111
You don't have to go broke to get more free time. 6-24-123
Keeping the beat while you push your body. 6-24-128
Living together is never having to say "I owe you." 6-24-135
What retirement is really like: "It took me about five minutes to adjust," 7-8-56; "I didn't expect to make so many real friends," 9-9-68; "It's kind of a party all the time." 10-21-58
How medical families spend their money: "We try to put more into the community than we take out," 7-22-84; "Acquiring possessions doesn't interest us." 12-9-60
Portable protection against hotel thieves. 7-22-116
"If I couldn't be a doctor, I'd... 7-22-120
The monster that ate my spare tire. 7-22-149
Is it time to tune in on space? 7-22-155
Tragedy followed me to the Andes. 8-19-62
When your body and psyche need five-star pampering. 9-9-160
I thought I was going to be disabled for life. 10-7-63
Moving: Simple rules to make it a cinch. 10-7-192
Real men collect ducks. 10-21-100
How to tell a good fur coat from a dog. 11-11-214
Our very different visit to the Caribbean. 11-25-106
Too busy to read? Give a listen! 11-25-117
Get the best of the new high-tech TV systems. 12-9-85
Toy soldiers never die; they just appreciate. 12-9-94
Whatever happened to life away from work? 12-9-160
A doctor's AIDS heartbreak: "Well, Dad, I finally have it." 12-23-48

PRACTICE MANAGEMENT

Relocate your office without dislocating your practice. 1-7-155
I collect \$36,000 a year for phone advice. 1-7-169
Efficient moves an embezzler will love you for. 1-7-177
Continued on page 207

ANNUAL SUBJECT INDEX

PRACTICE MANAGEMENT (cont.)

My time-saver turned out to be a patient-pleaser. 1-21-61
Let your patients do your PR work. 1-21-80
A good buy-sell agreement is worth its weight in legal fees. 1-21-137
Could this doctor ever have enough money? 2-4-54
Seeing more patients without shortchanging them. 2-4-74
A new dog learns old practice tricks. 2-4-223
Can a doctor be too good to his patients? 2-18-60
Make sure that practice merger is a perfect fit. 2-18-83
My call-in policy pays big dividends. 3-4-69
Are you strangling your practice? 3-4-151
What would you do with a fresh start? 3-4-218
Is working nights worth it? 3-18-73
Test yourself: How good a boss are you? 3-18-91
How I got a fair price for my practice. 3-18-141
What was the computer doing with this group's money? 3-18-155
A patient questionnaire that will get straight answers. 4-1-75
Whose practice is this, anyway? 4-15-64
Pump up and preserve your practice good will. 4-15-107
Better mailing systems to beat higher rates. 4-15-133
How to take a sabbatical every three years. 5-13-138
Who was draining two-thirds of the practice gross? 5-13-193
I give my patients Tom Selleck—and much more. 5-13-243
Will that hot idea burn your practice? 5-27-101
Why some practices flourish—and others flounder. 6-10-78
Relax your patients into loyalty. 6-10-217
The practice that outgrew itself. 6-24-66
You don't have to go broke to get more free time. 6-24-123
"I'm up to my ears in debt, and there's no way out." 6-24-169
Get back on schedule without adding a doctor. 7-8-67
How to handle your toughest job as a boss. 7-8-111
My long wait was a short course in practice management. 8-5-113
Don't let an idle computer bleed your practice. 8-19-147
Office staff meetings don't have to be a waste of time. 9-23-71
Can you really predict what a juror will think? 9-23-136
Supplies: How to avoid running out. 9-23-169
"Help me fix this practice or help me sell it." 10-21-46
How to train that new assistant. 10-21-141
The best way to wind up a patient visit. 11-11-67
This satellite office has my practice really rolling. 11-11-179
Could we save our practice from bankruptcy? 11-11-191
The phone call that almost cost me hundreds. 11-25-89
Get to know your patients before you meet

them. 11-25-121
I swore I'd never computerize. Then ... 11-25-127
Phone fees: Don't try to discourage phone calls by charging. 11-25-197
Benefits: Pay assistants for unused sick days. 11-25-198
How sex can wreck a practice. 12-9-86
Why our nurses are champs at fielding phone questions. 12-9-107
We revived our practice without resorting to ads. 12-9-153
Advisers: Finding a consultant to help manage your practice. 12-9-187
Why was too much money coming into this practice? 12-23-60
Patient relations: Helping patients to comply with treatment. 12-23-106

PRACTICE, SPECIAL TYPES

Did any OBG ever do a trickier C-section? 2-4-219
He keeps his patients on their toes. 3-18-230
The new health-care partnership: M.D.s and D.C.s. 5-27-80
This satellite office has my practice really rolling. 11-11-179
And here's an entire hospital that moves. 11-11-183
Small businesses gave us a big practice. 12-9-79

PROFESSIONS, OTHER

Would you like to fly the big ones? 1-7-100
Is this portfolio stuffed with profits? 1-7-173 ►



WANT TO SELL

- EQUIPMENT?
- A VACATION HOME?
- A PRACTICE?
- OR FILL A POSITION?

Let us fill your need with **MEDICAL ECONOMICS CLASSIFIED.**

You can sell almost anything physicians need and want, as many of your colleagues do, by using the Medical Economics Classified section. Such notices produce results because they're in the best-read journal for doctors.

Physicians everywhere scan the notices for information about practices, positions, placement opportunities, and office equipment. They also look for investment advice, vacation rentals, resorts, art for sale, and more. It's the only advertising listed on our contents page.

It's easy to participate

Just send us your classified notice. Each line costs only \$19 with a minimum of \$95 per ad. (For multiple insertions—\$17/line, min. \$85). Use 52 characters as an average count per line. Classified ads in display type are also available. For more information contact:

Classified Advertising

medical economics

680 Kinderkamack Rd.
Oradell, N.J. 07649
(201) 262-3030

ANNUAL SUBJECT INDEX

PROFESSIONS, OTHER (CONT.)

- The sunny seminars that rained on doctors. 1-21-66
Choosing the right camp for your kids. 1-21-117
A big earnings jump needn't mean a big tax jump. 2-4-64
Could 12 salmonellosis cases be coincidence? 2-4-130
Make sure that practice merger is a perfect fit. 2-18-83
The biggest malpractice sellout ever. 2-18-194
My bank wanted to charge extra for losing my \$40,000. 3-4-64
How to finish first at the bargaining table. 3-4-91
In home-buying, everyone has his own set of rules. 3-4-142
How to pack a lot of practice in a little office. 3-18-174
Five fast ways to zero in on stock winners. 3-18-265
Why some doctors spotted a giant scam—and others didn't. 4-1-140
Meet the guys who'll make—or break—your real estate deal. 4-1-157
Today's tax shelters: Better deals or prettier packages? 4-15-54
Better mailing systems to beat higher rates. 4-15-133
The elderly: Non-M.D.s move in. 4-29-99
Real estate brokers are feeling the malpractice heat. 5-13-144
How the IRS picks its audit targets. 5-27-76
The new health-care partnership? M.D.s and D.C.s. 5-27-80
Your broker's CDs may be better than the bank's. 5-27-87
Would your malpractice defense really hold up? 5-27-174
Why the price of art is so bloated. 6-10-128
In search of the perfect investment manager. 6-10-222
How a lawyer decides whether to sue you for malpractice. 6-24-148
When a broker won't let go of your account. 6-24-189
Doctors don't have the only malpractice crisis in town. 7-8-62
Is that a "financial planner" or a salesman? 7-22-70
Forget the heated pool. What I need is a cold shower. 7-22-127
I show clients what it's like to go to court. 7-22-140
How to keep a lawyer from running up your bill. 7-22-191
Play to win in a real estate showdown. 8-5-102
"My, what big tax shelters you have, Grandma!" 8-5-124
Don't let an idle computer bleed your practice. 8-19-147
Why I didn't sue after my car wreck. 9-9-67
Here's a quick fix when remodeling goes wrong. 9-9-119
Don't let a life insurance agent's bull stampede you. 9-23-155
All stock markets are not created equal. 10-7-58
I had to publicize or perish. 10-21-69

How a private eye checks out tax shelters. 11-11-60

Guess who the top investment managers are now. 11-25-31

The phone call that almost cost me hundreds. 11-25-89

Health-food stores are harming our patients. 12-9-27

How a pro invests: Be a realist—or be a loser. 12-9-56

RECORDS

- The biggest malpractice sellout ever. 2-18-194
Could your malpractice insurer's files cut off your privileges? 5-13-88
When the patient takes over, the doctor can get sued. 6-10-111
Incorporation: Loose ends that can hang you in an audit. 10-28-136
Patients love my fast shuffle. 11-11-161
Do you really know what you own? 11-11-209
Employees: Keeping track of your staff's performance. 12-23-107

RETIREMENT

- My pension plan got healthy when the experts got out. 1-21-175
When—and where—to stake your retirement claim. 5-13-92
Set a timetable for a senior doctor to phase out. 5-13-225
Could your financial plan weather a crisis? 5-27-154
Cut your pension costs—not your pension. 6-24-25
What retirement is really like: "It took me about five minutes to adjust," 7-8-56; "I didn't expect to make so many real friends," 9-9-68; "It's kind of a party all the time." 10-21-58
How a buy-out agreement hobbled my retirement. 8-5-145
Defined-benefit plans: Some of the glitter is glitz. 10-7-85
Retirement: One plan may not be enough. 10-28-60; Annuities: You can't call them old-fashioned anymore. 10-28-82
Put a cash cow in your pension plan. 11-11-93

SOCIAL SECURITY

- The elderly: How you'll feel their political muscle. 4-29-50
Give your needy patients more than health care. 6-10-169
Can Social Security really survive? 11-11-127

SPECIALTY AND GENERAL PRACTICE

- I'm tired of being a fall guy for hotshot specialists. 1-7-223
Continued on page 210

ANTIHISTAMINE-FREE Entex® LA

PHENYLPROPAANOLOLAMINE HCl 75 mg
GUAIACOLIN 400 mg
IN A SPECIAL BASE TO PROVIDE A PROLONGED
THERAPEUTIC EFFECT

Before prescribing or administering,
see package circular for full product information.
The following is a brief summary.

ENTEX® LA (phenylpropanolamine HCl/guaifenesin)
DESCRIPTION: Each ENTEX LA blue, scored, long-acting tablet for oral administration contains

phenylpropanolamine hydrochloride 75 mg
guaiacolines 400 mg
in a special base to provide a prolonged therapeutic effect.

INDICATIONS AND USAGE: ENTEX LA is indicated for the symptomatic relief of sinusitis, bronchitis, pharyngitis, and coryza when these conditions are associated with nasal congestion and viscous mucus in the lower respiratory tract.

CONTRAINDICATIONS: ENTEX LA is contraindicated in individuals with known hypersensitivity to sympathomimetics, severe hypertension, or in patients receiving monoamine oxidase inhibitors.

WARNINGS: Sympathomimetic amines should be used with caution in patients with hypertension, diabetes mellitus, heart disease, peripheral vascular disease, increased intraocular pressure, hyperthyroidism, or prostate hypertrophy.

PRECAUTIONS: Information for Patients: Do not crush or chew ENTEX LA tablets prior to swallowing.

Drug Interactions: ENTEX LA should not be used in patients taking monoamine oxidase inhibitors or other sympathomimetics.

Drug/Laboratory Test Interactions: Guaifenesin has been reported to interfere with clinical laboratory determinations of urinary 5-hydroxyindoleacetic acid (5-HIAA) and urinary vanilmandelic acid (VMA).

Pregnancy: Pregnancy Category C. Animal reproduction studies have not been conducted with ENTEX LA. It is also not known whether ENTEX LA can cause fetal harm when administered to a pregnant woman or can affect reproduction capacity. ENTEX LA should be given to a pregnant woman only if clearly needed.

Nursing Mothers: It is not known whether the drugs in ENTEX LA are excreted in human milk. Because many drugs are excreted in human milk and because of the potential for serious adverse reactions in nursing infants, a decision should be made whether to discontinue nursing or to discontinue the product, taking into account the importance of the drug to the mother.

Pediatric Use: Safety and effectiveness of ENTEX LA tablets in children below the age of 6 have not been established.

ADVERSE REACTIONS: Possible adverse reactions include nervousness, insomnia, restlessness, headache, nausea, or gastric irritation. These reactions seldom, if ever, require discontinuation of therapy. Urinary retention may occur in patients with prostatic hypertrophy.

OVERDOSAGE: The treatment of overdosage should provide symptomatic and supportive care. If the amount ingested is considered dangerous or excessive, induce vomiting with ipecac syrup unless the patient is convulsing, comatose, or has lost the gag reflex, in which case perform gastric lavage using a large-bore tube. If indicated, follow with activated charcoal and a saline cathartic. Since the effects of ENTEX LA may last up to 12 hours, treatment should be continued for at least that length of time.

NDC 0149-0436-01 Bottle of 100

CAUTION: Federal law prohibits dispensing without prescription

ENXLATB-B56

REVISED MARCH 1985

Norwich Eaton

Norwich Eaton Pharmaceuticals, Inc.
Norwich, New York 13815
A Procter & Gamble Company

ANNUAL SUBJECT INDEX

SPECIALTY AND GENERAL PRACTICE (cont.)

Family practice is becoming the first victim of competition. 2-4-29

How I boosted my earnings 40 percent. 2-4-161

It's great to be an otolaryngologist these days. 2-4-192

Subspecialists are squeezing me out. 2-18-65

An up-close look at emergency medicine specialists. 3-4-188

He keeps his patients on their toes. 3-18-230

Yes sir, that's my fetus! 5-13-153

Will patient confidentiality survive this Medicaid challenge? 7-22-37

The doctor with 13 "specialties." 7-22-75

Nothing went right, yet my patient's still my friend. 8-5-78

Big-city specialists are throwing away my referrals. 8-19-99

Is this the one patient you'll never forget? 9-9-132

Doctors' earnings: the year of the big surprise. 9-9-194

How a "surefire" referral can get you sued. 9-23-53

Who's doing the best job of holding down fees? 10-7-137

I had to publicize or perish. 10-21-69

Now I'm glad my patient was so stubborn. 10-21-86

When a doctor knows he isn't good enough. 10-21-118

Why we'll always need family doctors. 11-11-186

Practice costs: Can you regain control? 11-11-222

What puts a doctor and his patient on opposite sides? 11-25-70

Small businesses gave us a big practice. 12-9-79

Why our nurses are champs at fielding phone questions. 12-9-107

TAXES

The stakes are high in the IRS deadline challenge. 1-7-126

Six expensive surprises in the latest tax law. 1-7-188

Simple answers to tough questions about car deductions. 1-21-62

Answers to your tax questions. 1-21-99; 2-4-85;

2-18-97; 3-4-103; 3-18-85

A big earnings jump needn't mean a big tax jump. 2-4-64

Where the traps are in the new capital gains rules. 2-4-215

How to avoid being flattened by the flat tax. 2-18-27

A 2-inch treasure trove of tax savings. 2-18-66

Where savings should show up on your '84 return. 3-4-228

A tax gamble you'll never want to take. 3-18-197

New tax breaks that make divorce less painful. 4-1-125

Today's tax shelters: Better deals or prettier packages? 4-15-54

Should you set up your own charitable foundation? 4-15-190

Get the IRS on your side from the start. 5-13-111

Estate-planning mistakes that can trap your family. 5-13-232

How the IRS picks its audit targets. 5-27-76

Who milks whom in these tax shelters? 5-27-187

Healthy survivors of the tax-shelter crackdown. 6-10-72

When you should break the estate-planning rules. 6-10-89

Entertainment deductions that still stand up. 6-10-237

Cut your pension costs—not your pension. 6-24-25

The new rules for finding real estate profits. 7-8-68

Is the wrong kind of corporation costing you money? 7-8-121

What's really happened to car deductions. 8-5-25

The rules for this tax break are tougher than ever. 8-19-53

How I built a better tax shelter. 9-9-107

Don't let a life insurance agent's bull stampede you. 9-23-155

How to get the very most from your life insurance. 10-21-81

Tax strategy: Don't wait for Washington to cut your bill. 10-28-28

Real estate: How to prosper with fewer tax breaks. 10-28-50

Annuities: You can't call them old-fashioned anymore. 10-28-82

Estate planning: Eight questions you'd better answer today. 10-28-94

My biggest tax break: a landmark office. 11-11-151

The right way to build a college fund. 11-11-169

What could make your tax shelter a target for the IRS. 12-23-25

TRAVEL

Is this the ultimate test of marriage? 1-7-160

Go for the green! 2-4-102

Where to go after you've seen it all. 2-18-130

Noah had better luck getting off Ararat than we did. 3-4-110

Facing the world with map and compass. 3-18-258

An island apart, a world of difference. 4-15-150

How to take a sabbatical every three years. 5-13-138

What you need to do to protect yourself abroad. 5-13-187

I saved a life—right under Lenin's nose. 5-13-214

Our low-stress, high-pleasure European vacation. 5-27-108

The best of Hawaii—from doctors who know. 6-10-182

Time-share switching: A bonus or a bane? 6-24-111

Portable protection against hotel thieves. 7-22-116

Cruising Europe at 180 kph. 8-5-121

Tragedy followed me to the Andes. 8-19-62

When your body and psyche need five-star pampering. 9-9-160

How I got pinched in my piaster. 10-7-124

Our very different visit to the Caribbean. 11-25-106

Trip insurance: Cover losses from sudden cancellation. 11-25-198

Cheapie charters are great deals, if . . . 12-9-145